



Practitioner's Docket No. AHS-19

PATENT

Preliminary Classification:

Proposed Class:

Subclass:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450



NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of

Inventor(s): Mark E. Baratz; Mark Carl Miller; Patrick D. Devanny; Jufang He

For (title): METHOD AND APPARATUS FOR ASSESSING HAND STRENGTH

1. Type of Application

This application is for an original (nonprovisional).

2. Papers Enclosed

A. Required for filing date under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application

6 Page(s) of Specification

EXPRESS MAILING UNDER 37 C.F.R. § 1.10\*

(Express Mail label number is *mandatory*.)

(Express Mail certification is *optional*.)

I hereby certify that this paper, along with any document referred to, is being deposited with the United States Postal Service on this date October 30, 2003, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No. EL700961722US.

Date: 10/30/03

Tracey L. Milka

Type or print name of person mailing paper

Tracey L. Milka  
Signature of person certifying

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3 Page(s) of Claims  
3 Sheet(s) of Drawing(s)--Informal

**B. Other Papers Enclosed**

1 Page(s) of abstract

**3. Declaration or Oath**

Not Enclosed.

Application is made by a person authorized under 37 C.F.R. § 1.41(c) on behalf of all of the above-named inventors.

**4. Inventorship Statement**

The inventorship for all the claims in this application is the same.

**5. Language**

English

**6. Assignment**

An assignment of the invention to Allegheny-Singer Research Institute will follow.

**7. Fee Calculation (37 C.F.R. § 1.16)**

Regular Application

CLAIMS AS FILED										
Number Filed			Number Extra			Rate		Basic Fee 37 C.F.R. § 1.16(a) 770.00		
<hr/>										
Total Claims (37 C.F.R. § 1.16(c))	13	–	20	=	0	x \$	18.00	= \$		0.00
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Independent Claims (37 C.F.R. § 1.16(b))	2	–	3	=	0	x \$	86.00	= \$		0.00
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Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))						+ \$	290.00	= \$		0.00

Filing Fee Calculation

\$770.00

**8. Assertion of Small Entity Status**

Applicant hereby asserts status as a small entity under 37 C.F.R. § 1.27.

Filing Fee Calculation (50% of above Filing Fee Calculation) \$385.00

**9. Fee Payment Being Made at This Time**

Enclosed

Filing Fee  
\$385.00

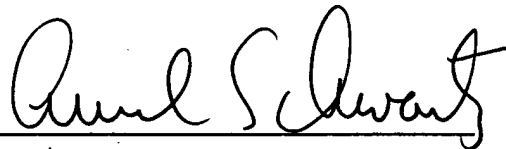
**Total Fees Enclosed** \$385.00

**10. Method of Payment of Fees**

Attached is a check in the amount of \$385.00.  
A duplicate of this paper is attached.

**11. Instructions as to Overpayment**

Credit Account No. 19-0737.



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